## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09765835

. CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS							Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			27 minus 20=		. 7			X\$ 9=		OR	X\$18=	126
INDEPENDENT CLAIMS			G minus 3 =		*3			X40=		OR	X80=	2,40
MU	LTIPLE DEPEN	RESENT				<u> </u>	+135=		OR	+270=		
* If the difference in column 1 is less to				s than zero, enter "0" in c			L	TOTAL		OR	TOTAL	1076
	C	LAIMS AS A	MENDED	- PAR	TII					J	OTHER	THAN
	g=	(Column 1)	(Colum HIGH					SMALL ENTITY		OR	SMALL	ENTITY
AMENDMENT A	S. A.	REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 43	Minus	**7	7	= /0		X\$ 9=	144	OR	X\$18=	
	Independent	NTATION OF M	Minus	*** <i>(</i>	P CLAINA	]=		X40=	7	OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
								TOTAL ODIT. FEE	144	OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	7.	JUII. I EL	<i>/ / /</i>		ADDII. 1 EE 1	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=			+270=	
							L	+135= TOTAL		OR	+270= TOTAL	
		AC	DDIT. FEE		OR	ADDIT. FEE						
_		(Column 1) CLAIMS		(Colu		(Column 3)	1 <u> </u>					
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	↓	X40=		OR	X80=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135=										+270=	
•	f the entry in colu	mn 1 is less than t	he entry in colu	mn 2, write	e "0" in co	lumn 3.	L	+135= TOTAL		OR	TOTAL	
**	If the "Highest Nu	mber Previously P mber Previously P	aid For" IN THI	S SPACE	is less tha	n 20, enter "20.	·" AC	DIT. FEE		OR	ADDIT. FEE	
		nber Previously Pa					er found	d in the app	ropriate box	in co	lumn 1.	